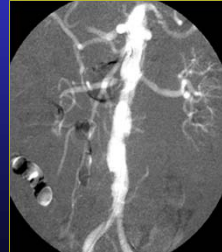


- *The views presented reflect those of the author/presenter and do not necessarily reflect those of ASDIN nor serve as an endorsement of safety, efficacy or applicability of said procedure.*

Use of CO₂ and Other Contrast Agents in Endovascular Procedures



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Disclosure

None

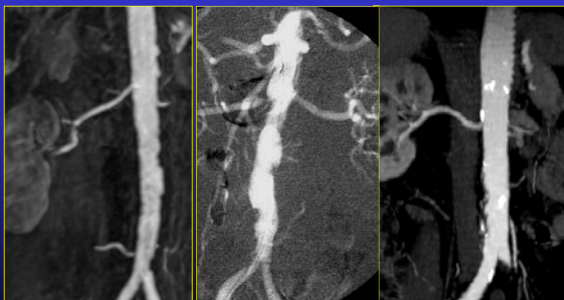


Outline

- CO₂ Angiography
- Gadolinium Angiography
- Saving Iodinated contrast



Which is which?



MRA

CO₂

CTA

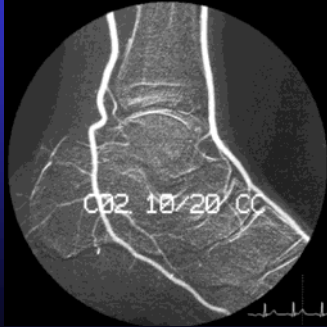
Which contrast agent?

Iodine, gadolinium or CO₂



Which contrast agent?

Iodine, gadolinium or CO_2



CO_2 IS THE ONLY

PROVEN

"SAFE"

CONTRAST FOR

ALLERGY

AND/OR RENAL FAILURE

CO_2 for Diagnosis and Intervention in the arterial circulation

"EXCEPT"

Thoracic aorta, Coronary and cerebral circulations

CO_2 for Diagnosis and Intervention in the venous circulation

20 SWINE

CO_2 IV

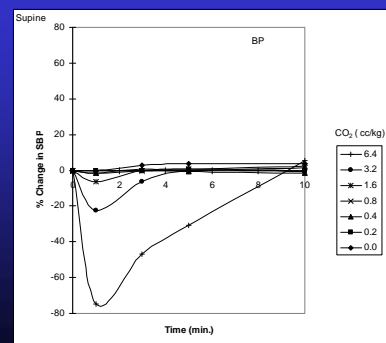
.2cc - 6.4 cc/kg

EXTENSIVE
MONITORING
PA PRESSURE
Blood gases

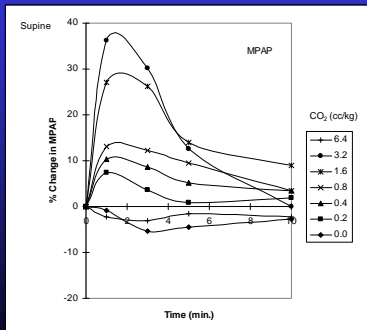


- 60cc: no change
- 60 cc: ↑ PA pressure
- 600cc: 1 death

BP response to intracaval CO_2



PA pressure response to CO₂



CO₂ Cylinder



CARBON
DIOXIDE
USP

99.9% Pure CO₂

Delivery of CO₂

- Hand-held Syringe
- Plastic bag
- CO₂mmander w/AngiAssist
- CO₂ injector

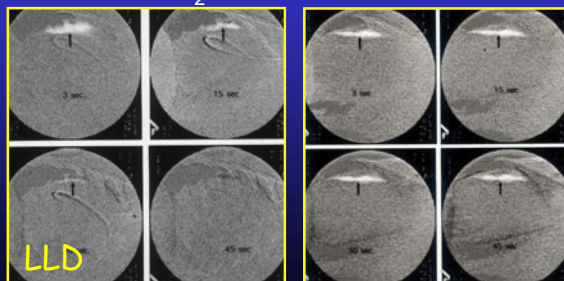
Properties of CO₂

- High solubility
- Low viscosity
- Buoyancy
- Compressibility

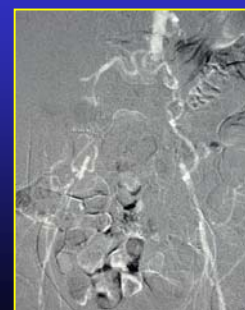
CO₂ is 20 times more soluble than oxygen

5 cc CO₂

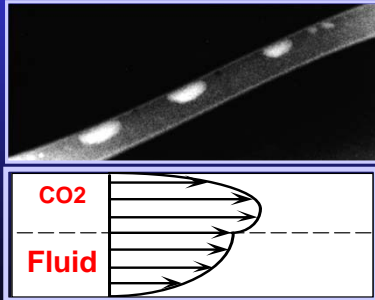
5 cc Air



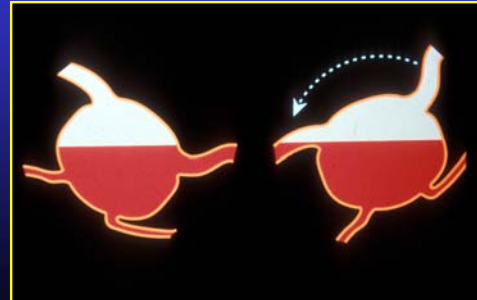
CO₂ is 400 times less viscous than iodinated contrast



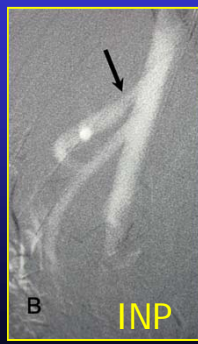
CO₂ is extremely buoyant and displaces rather than mixes with blood.



CO₂ in the aorta floats, filling the celiac and SMA.



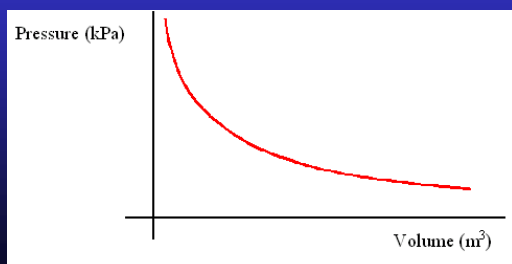
30 CC CO₂ X-TABLE LAT



20 cc CO₂ L Side UP



According to Boyle's Law, CO₂ will be compressed in the catheter during the injection

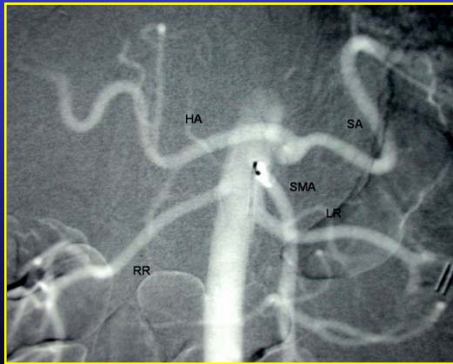


CO₂ Reflux



Buoyant and compressed CO₂ injected between wire and catheter refluxes into the aorta

CO₂ Reflux



CO₂ Reflux

20 cc CO₂
Antegrade
Inj. in SFA

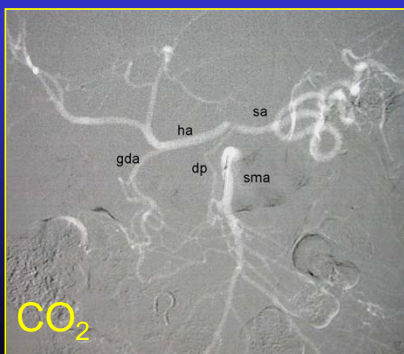


Applications of CO₂ Angiography

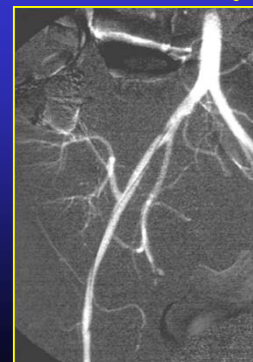
Arterial Applications

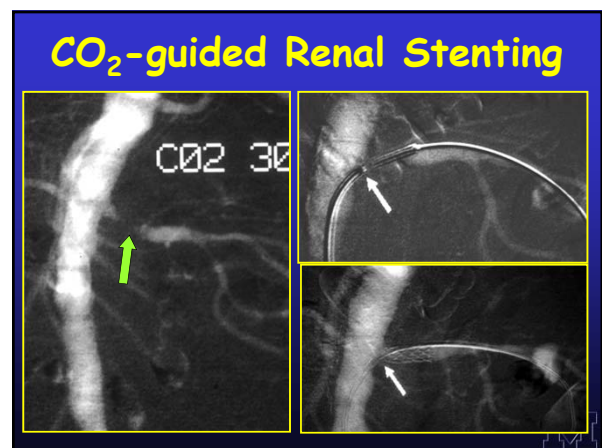
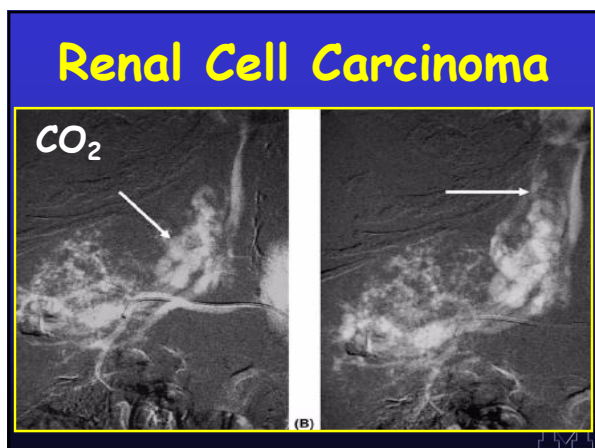
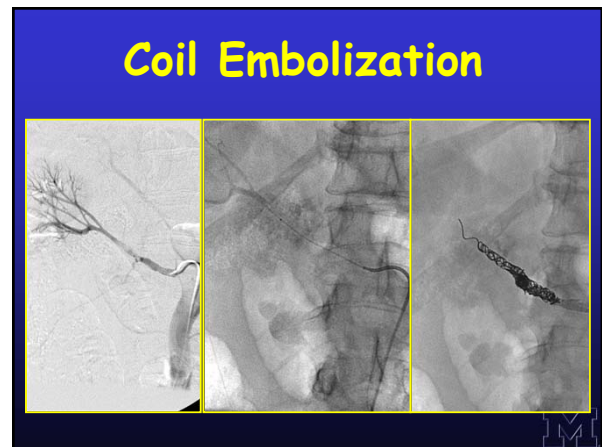
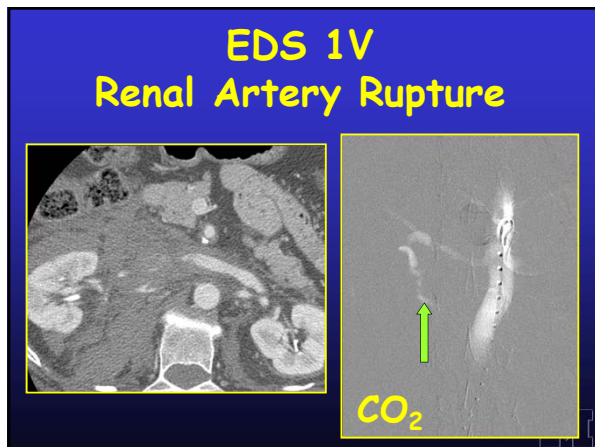
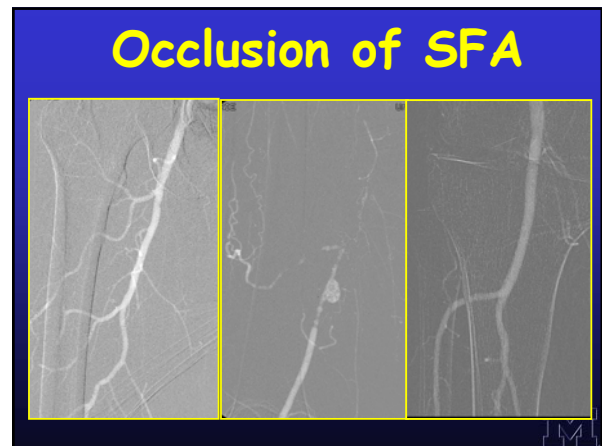
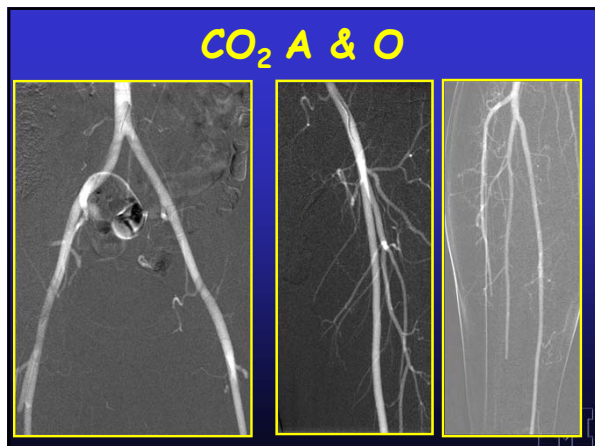
- A & O
- Renal artery
- Mesenteric artery
- Renal transplant
- Detection of bleeding
- Tumors
- Aneurysm, AVM, AVF
- Interventions

Celiac Axis Occlusion



Renal transplant





Post Renal Biopsy Hematuria



Common Iliac Artery Aneurysm



Venous Applications of CO₂ Angiography

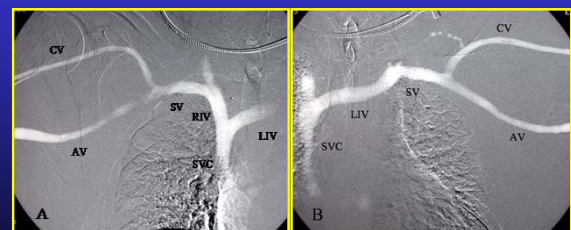
Indications

- Opacify central veins
- PTA and stent placement
- IVC filter placement
- TIPS
- Transjugular liver biopsy
- Splenoportography
- Portal vein access

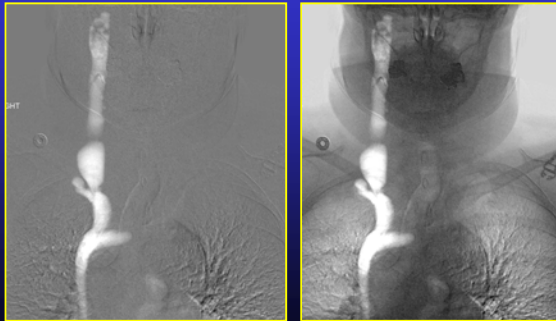
Upper Limb Venograms



CO₂ Central Venograms



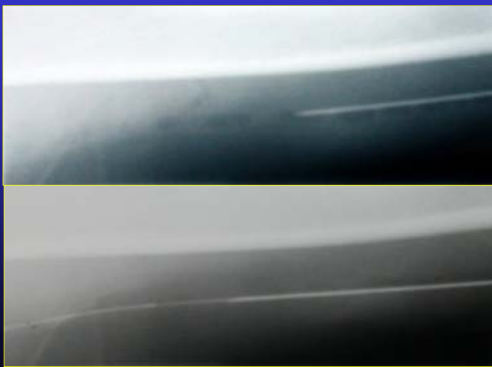
CO₂ Jugular Venogram



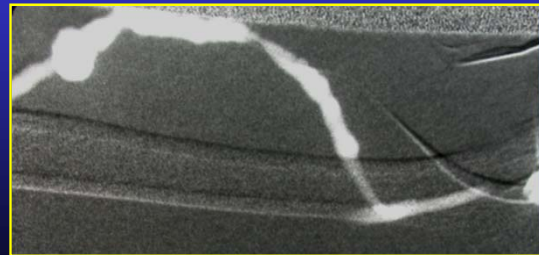
CO₂ Jugular Venogram



CO₂ for PICC



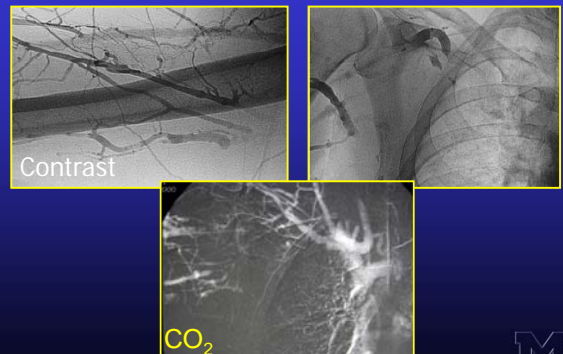
CO₂ fistulogram

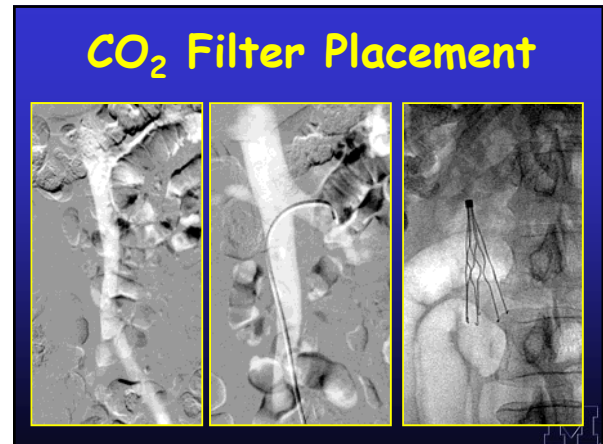
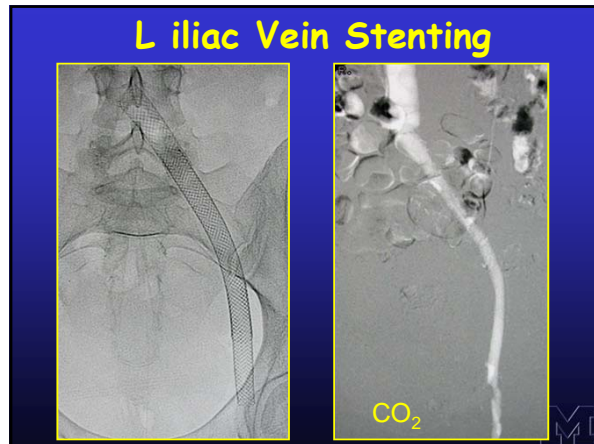


Occlusion of left subclavian vein



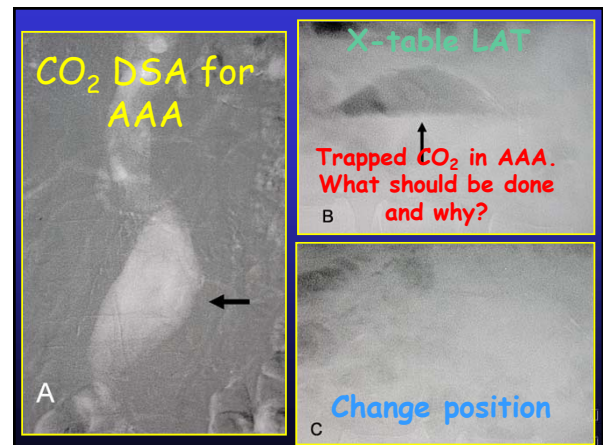
Axillosubclavian Vein Thrombosis





Potential Complications of CO₂ Angiography

- Air contamination
- Vapor lock:
 - Pulmonary artery (hypotension)
 - Mesenteric artery (Intestinal ischemia)
 - Simultaneous nitrous oxide anesthesia
- Neurotoxicity (CO₂ injection in carotid artery)
- Paradoxical embolism
- Hepatic capsule laceration (CO₂ wedge injection)



CO₂ guided Vascular Mapping for Hemodialysis Access Surgery in a Patient with Failing Renal Allograft

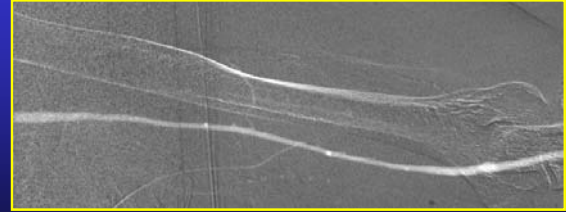
Case History

- 51 y/o F w/ PCKD and ESRD
- Failing renal txp
- Failed dialysis fistula, bil UE
- L basilic vein-radial artery fistula
- Request for:
 - L arm venogram
 - L arm arteriogram

L arm CO₂ venogram

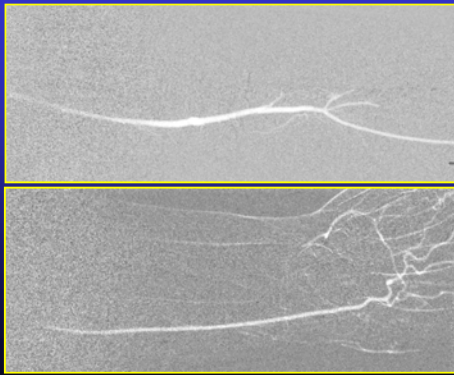


Brachial Artery Puncture for CO₂ DSA



Adverse reaction: lightheaded, bradycardic and hypotensive

L forearm DSA



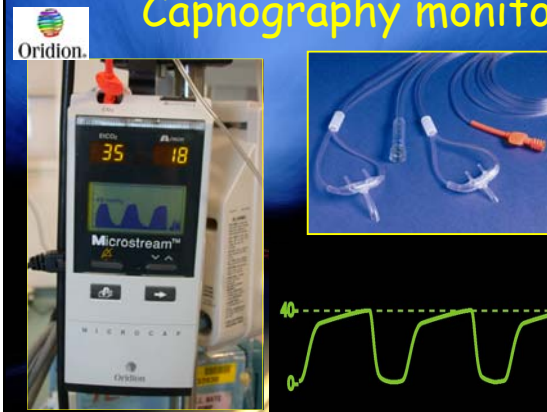
How to make CO₂ angiography work better?

- DSA
- Endhole catheter
- Reflux angiography
- Selective injections
- New mask (move mask)
- Stacking
- Elevate area of interest
- Vasodilators

Monitoring CO₂ Angiography

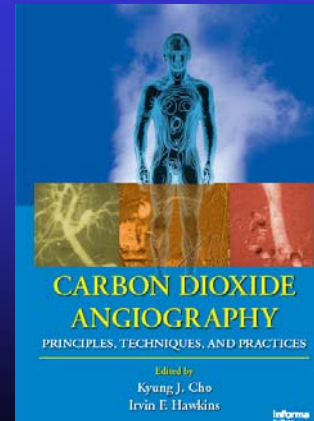
- Oxygenation = Pulse oximetry
- Perfusion = BP, HR, ECG
- Ventilation = Capnography

Capnography monitor



Conclusions

- CO_2 is the only proven safe contrast agent in allergy and renal failure.
- CO_2 should not be used as an arterial contrast agent above the diaphragm.
- Use a closed system for CO_2 delivery to prevent air contamination.
- Do not use with nitrous oxide anesthesia.
- The advantages of CO_2 include use of unlimited total volume and low viscosity for vascular diagnosis and endovascular intervention.



Gadolinium Angiography



Physical Properties of CO_2 , Gadolinium and Iodine

Atomic number

CO_2 $\text{C} = 6, \text{O} = 8$

Gd 64

Iodine 53

Fewer Gd atoms /cc of contrast: 1/3 attenuation values



Radiopacity Comparison



Gadolinium-assisted Renal Stenting



Gd-guided Renal Embolization



Hematuria after percutaneous renal biopsy. Gd renal arteriogram demonstrates active extravasation in lower pole of left kidney that was embolized with microcoils



Iodinated Contrast Saving Strategies

- CO_2 for arteriography and venography, and endovascular intervention
- Dilute iodinated contrast agent when needed.



Thank you

